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03500.017396



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: S. Hsieh
YASUYUKI HIRAI)	
	:	Group Art Unit: 2861
Appln. No.: 10/616,935)	
	:	Allowed: August 19, 2004
Filed: July 11, 2003)	
	:	
For: INK JET RECORDING APPARATUS)	
AND RECOVERY MECHANISM	:	
PORTION OF INK JET RECORDING)	
APPARATUS	:	November 19, 2004

Mail Stop Issue Fee
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT UNDER 37 CFR 1.312

Sir:

Introductory Comments

Applicant is in receipt of a Notice of Allowance and Fee(s) Due dated August 19, 2004. The Issue Fee is due to be paid November 19, 2004. Applicant respectfully requests the Examiner to consider and enter the following amendments to the above-identified application.



In re Application of:

YASUYUKI HIRAI

Application No.: 10/616,935

Filed: July 11, 2003

For: INK JET RECORDING APPARATUS AND
RECOVERY MECHANISM PORTION OF
INK JET RECORDING APPARATUS

Docket No.: 03500.017396

Examiner: S. Hsieh

Group Art Unit: 2861

Allowed: August 19, 2004

Date: November 19, 2004

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COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment Under 37 CFR 1.312 in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	8	MINUS	20	= 0	x \$ 9 \$18	\$0.00
INDEP. CLAIMS	2	MINUS	3	= 0	x \$44 \$88	\$0.00
Fee for Multiple Dependent claims \$150°/\$300						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$____ is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.

☐ A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our below-listed address.

Respectfully submitted,



Mark A. Williamson
Attorney for Applicant
Registration No. 33,628

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MAW\lnt

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